

### **REMARKS**

These remarks are submitted in response to the Final Office Action (“FOA”) of October 23, 2003. The FOA rejected claims 10, 12-17, and 21-24 under 35 U.S.C. § 103(a) as being unpatentable over U.S. Patent 6,270,475 to Bestetti et al. (“Bestetti”), U.S. Patent 5,954,687 to Baudino et al. (“Baudino”), or U.S. Patent 6,010,494 to Schafer et al. (“Schafer”) in view of U.S. Patent 5,279,610 to Park et al. (“Park”) or U.S. Patent 5,391,156 to Hildwein et al (“Hildwein”). The FOA also rejected claims 27-39, 40, 42-54, and 56-62 under 35 U.S.C. § 103(a) as being unpatentable over U.S. Patent 5,480,410 to Cuschieri et al. (“Cuschieri”) in view of Park, in view of U.S. Patent 5,674,196 to Donaldson et al. (“Donaldson”) or U.S. Patent 5,607,390 to Patsalos et al (“Patsalos”). In this response, Applicants have made no amendments to the pending claims, but do present arguments supporting the patentability of the pending claims over the combinations of cited art.

In order for a combination of references to establish a case of prima facie obviousness, three requirements must be met: (1) there must be some suggestion or motivation, either in the references themselves or in the knowledge generally available to one of ordinary skill in the art, to modify the reference or to combine the reference teachings; (2) there must be a reasonable expectation of success; and (3) the prior art references when combined must teach or suggest all the claim limitations. *MPEP* §2142.

The Federal Circuit has said, “[t]he genius of invention is often a combination of known elements which in hindsight seems preordained. To prevent hindsight invalidation of patent claims, the law requires some ‘teaching, suggestion or reason’ to combine cited references. When the art in question is relatively simple, as is the case here, the opportunity to judge by hindsight is particularly tempting. Consequently, the tests of whether to combine references need to be applied rigorously.” *McGinley v. Franklin Sports, Inc.*, 262 F.3d 1339, 1351 (Fed. Cir. 2001) (cites omitted).

#### **I. 35 U.S.C. § 103(a) Rejections Based On Bestetti, Baudino, Or Schafer In View Of Park Or Hildwein.**

For the following reasons, Applicants respectfully submit that the FOA has failed to establish a case of prima facie obviousness for the 35 U.S.C. § 103(a) rejections based on Bestetti, Baudino, or Schafer in view of Park or Hildwein. Specifically, said obviousness

rejections lack the necessary suggestion or motivation for the combination, and said obviousness rejections fail to teach or suggest each and every limitation recited in some of the claims.

Therefore, Applicants respectfully request that the obviousness rejections of claims 10, 12-17, and 21-24 be reconsidered and withdrawn.

**A. The 35 U.S.C. § 103(a) rejections based Bestetti, Baudino, or Schafer in view of Park or Hildwein lack the necessary suggestion or motivation for the combination.**

For the following reasons, Applicants respectfully submit that the 35 U.S.C. § 103(a) rejections based Bestetti, Baudino, or Schafer in view of Park or Hildwein lack the necessary suggestion or motivation for the combination.

**a. Schafer teaches against its combination with Park or Hildwein.**

As explained in Applicants' preceding paper<sup>1</sup>, neither Bestetti nor Baudino disclose that a device travels through the catheter. Furthermore, with respect to Schafer, because "[t]he diameter of the aperture 3 opposing the cannula 21 is smaller than the spherical end 22 of the cannula," "the cannula cannot be fully pushed through the chamber 1 but only up to the stop of the spherical cannula end 22."<sup>2</sup> Thus, Schafer actually teaches against its combination with Park or Hildwein (i.e., Schafer actually teaches against a device traveling through its catheter).

**b. Park is not implanted and, as a result, does not teach or suggest the conventionality of inserting an instrument through an implanted catheter, much less an implanted port body or port member.**

The FOA asserts that Park and Hildwein demonstrate the conventionality of inserting an instrument through an implanted catheter and, as a result, it would have been obvious to modify Bestetti, Baudino, or Schafer with this capability. For the following reasons, Applicants respectfully submit that this assertion is incorrect and the requisite teaching for the combination is lacking.

According to MedTerms.com Medical Dictionary, implant means "[t]o embed; to set in firmly. That which is embedded. For example: lens implants, breast implants, cochlear

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<sup>1</sup> see, Applicants' Amendment in response to the Office Action of April 9, 2003, pages 9-10.

<sup>2</sup> see, *Schafer*, col. 2, ll. 54-55; col. 3, ll. 1-3; FIG. 1..

implants, defibrillator implants, pacemaker implants, etc.”<sup>3</sup> According to Dictionary.com, embed means “[t]o fix firmly in a surrounding mass: *embed a post in concrete; fossils embedded in shale.*”<sup>4</sup>

Park discloses an “[o]esophageal introducer assembly 10 compris[ing] coaxial introducer guide 11, dilator 12, and outer sheath 13. The introducer guide includes a tube ... extending from outside the mouth of a patient to the patient's stomach. The introducer guide provides for the introduction of the threadably interconnected dilator and outer sheath thereover and into the esophagus of the patient.” *Park, col. 3, ll. 50-63; FIG. 1*. As illustrated in FIG. 4, “[w]hen [the outer sheath 13 is] positioned in the esophagus, the patient bites on the distal portion of mouthpiece 35 and the proximal end of outer sheath 13.” *Park, col. 4, ll. 15-17*. Thus, Park is not embedded in the patient like “lens implants, breast implants, cochlear implants, defibrillator implants, pacemaker implants,” or like Bestetti, Baudino, Schafer or Applicants’ invention as recited in claims 10, 12-17, and 21-24. In other words, Park is not implanted. Therefore, Park does not teach or suggest the conventionality of inserting an instrument through an implanted catheter, much less an implanted port body or port member as recited in the claims.

**c. Neither Hildwein nor Park teach or suggest inserting an instrument through a self-sealing membrane and a catheter extending therefrom, as they would need to do in order to teach or suggest the necessary modification of Schafer, Baudino, or Bestetti.**

Schafer has a self-closing membrane 4 to “prevent[] foreign bodies from entering the body.” *Schafer, col. 1, ll. 37-39*. Baudino has a self-sealing septum 32 that “covers fluid reservoir 24 and isolates fluid reservoir 24 from the external environment to prevent contamination of the fluid within the fluid reservoir 24.” *Baudino, col. 4, ll. 50-52*. Bestetti has a self-closing membrane 21 that fills and seals the chamber 20 of the port body 1. *Bestetti, col. 3, ll. 3-6*. Applicants’ claims 10, 12-17 and 21-24 recite an “elastic self closing diaphragm,” an “elastic self-closing diaphragm,” an “elastic closing diaphragm” (see, independent claims 10, 15 and 16, respectively).

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<sup>3</sup> see, Exhibit A enclosed with this response or visit <http://www.medterms.com/script/main/art.asp?ArticleKey=23620>

<sup>4</sup> see, Exhibit B enclosed with this response or visit <http://dictionary.reference.com/search?q=embed>

In contrast, neither Hildwein nor Park teach or suggest a self-sealing membrane. While Hildwein or Park may disclose an instrument passing through a tube, they do not teach or suggest an instrument passing through a self-sealing membrane and a tube extending therefrom. It is one thing to insert an instrument through a tube. However, it quite another thing to insert an instrument through a self-sealing membrane and a tube extending therefrom. Without teaching or suggesting both of these aspects, Hildwein and Park could not honestly be considered to teach or suggest the necessary modification of Schafer, Baudino, or Bestetti.

For the aforementioned reasons, Applicants respectfully submit that the 35 U.S.C. § 103(a) rejections based Bestetti, Baudino, or Schafer in view of Park or Hildwein lack the necessary suggestion or motivation for the combination. Therefore, the FOA has failed to establish a case of prima facie obviousness. Applicants respectfully request that the obviousness rejection of claims 10, 12-17, and 21-24 be reconsidered and withdrawn.

**B. The combinations of Bestetti, Baudino, or Schafer in view of Park or Hildwein fail to teach or suggest each and every limitation of claims 13, 15-17, 23 and 24.**

Applicants' claim 13 (which depends on independent claim 10) recites, "a tube extending from the port body into the interior of the living body" and "a second tube extending from the port body into the interior of the living body." Applicants' independent claim 15 recites, "a feed tube and an aspiration tube extending away from said shaft section and into an interior region of the body." Similarly, Applicants' independent claim 16 recites, a feed tube and an aspiration tube extending away from said elastic closing diaphragm into an interior region of the body." Unlike claims 13, 15 and 16, Schafer, Bestetti and Baudino each disclose a single catheter extending from their respective port bodies. Thus, Schafer, Bestetti and Baudino fail to teach or suggest every limitation recited in Applicants' claims 13, 15 and 16. Furthermore, neither Hildwein nor Park remedy this deficiency of Schafer, Bestetti and Baudino.

For at least this reason, Applicants respectfully submit that the 35 U.S.C. § 103(a) rejections based Bestetti, Baudino, or Schafer in view of Park or Hildwein fail to teach or suggest each and every recited limitation of dependent claim 13, independent claim 15, independent claim 16, and the claims depending on claim 16, namely claims 17, 23, and 24. Therefore, the FOA has failed to establish a case of prima facie obviousness for claims 13, 15-17, 23 and 24.

Applicants respectfully request that the obviousness rejection of claims 13, 15-17, 23 and 24 be reconsidered and withdrawn.

**II. 35 U.S.C. § 103(a) Rejections Based On Cuschieri In View Of Park, In View Donaldson Or Patsalos.**

The FOA rejected claims 27-39, 40, 42-54, and 56-62 under 35 U.S.C. § 103(a) as being unpatentable over Cuschieri in view of Park, in view Donaldson or Patsalos. In other words the FOA rejected claims 27-39, 40, 42-54, and 56-62 as being unpatentable over Cuschieri in view of Park, in view Donaldson or, alternatively, as being unpatentable over Cuschieri in view of Park, in view Patsalos. For the following reasons, Applicants respectfully submit that the FOA fails to establish a case of prima facie obviousness for these alternative obviousness rejections. Specifically, said obviousness rejections lack the necessary suggestion or motivation for the combinations. Also, one of the combinations lacks a reasonable expectation of success, and the other combination fails to suggest or teach each and every limitation recited in the claims. Therefore, Applicants respectfully request that the obviousness rejections of claims 27-39, 40, 42-54, and 56-62 be reconsidered and withdrawn.

**A. Park is not implanted and, as a result, does not teach or suggest the conventionality of inserting an instrument through an implanted catheter, much less through an implanted port body or an implanted elastic self closing diaphragm as recited in the claims.**

The FOA based its motivation for combining Cuschieri with Donaldson and Cuschieri with Patsalos on teachings/suggestions supposedly contained in Park. In other words, according to the FOA, Park provides the necessary motivation to make the Cuschieri/Donaldson and the Cuschieri/Patsalos combinations. Specifically, lines 20-21 of page four in the FOA assert that Park “demonstrates that it is conventional in the art to introduce medical devices through implanted catheters.” However, as explained in preceding section I.A.b. of this response, Park is not embedded in the patient. Therefore, Park does not teach or suggest the conventionality of introducing medical devices through implanted catheters, much less through an implanted port body or an implanted elastic self closing diaphragm as recited in the claims. For at least this reason, Applicants respectfully submit that the necessary suggestion or motivation for the Cuschieri/Park/Donaldson and Cuschieri/Park/Patsalos combinations is lacking and, as a result,

the FOA has failed to establish a case of prima facie obviousness for claims 27-39, 40, 42-54 and 56-62. Applicants respectfully request that the obviousness rejection of claims 27-39, 40, 42-54, and 56-62 be reconsidered and withdrawn.

**B. Cuschieri In View Of Park, In View Donaldson.**

As explained in the preceding section and contrary to the assertion made by the FOA, Park does not teach or suggest the conventionality of introducing medical devices through implanted catheters. Therefore, the FOA has failed to establish a case of prima facie obviousness for the Cuschieri/Park/Donaldson combination. Furthermore, the Cuschieri/Park/Donaldson combination is also deficient because Donaldson is nonanalogous art and the Cuschieri/Park/Donaldson combination fails to teach or suggest each and every limitation recited in the claims.

**a. Applying Federal Circuit case law to the facts at hand establishes that Donaldson is nonanalogous to Applicants' claimed invention.**

Applicants have carefully considered the Examiner's position reflected in the FOA regarding the appropriateness of Donaldson as a reference and respectfully offer the following analysis of the facts in light of relevant Federal Circuit law regarding nonanalogous art. For art to be analogous, it must be: (1) from the same field as the inventor's endeavor; or (2) "reasonably pertinent to the particular problem with which the inventor is involved." *In re Clay*, 966 F.2d 656, 658-59 (Fed. Cir. 1992).

*1. Donaldson is not from the same field as Applicants' endeavor.*

In *Clay*, the claimed invention pertained to the introduction of gel into the confined dead volume of an oil storage tank. *Id.* at 659. The cited reference pertained to use of gel in underground oil-bearing formations. *Id.* The PTO argued that Clay's invention and the cited reference were both directed to the common endeavor of maximizing withdrawal of petroleum stored in petroleum reservoirs. *Id.* The Federal Circuit disagreed and said that the cited reference could not be considered to be within Clay's field of endeavor "merely because both relate to the petroleum industry." *Id.* The Federal Circuit found that Clay and the cited reference did not share common fields of endeavor because Clay's field of endeavor pertained to the storage of refined liquid hydrocarbons, and the cited reference pertained to the extraction of crude petroleum. *Id.*

Like Clay, the FOA cannot find that Applicants' invention and Donaldson are analogous merely because they are both (according to the FOA) introductory ports that require an insertion space. Applicants' invention is directed to "an implantable device for providing access to the interior of the body and for providing for detecting the concentration and/or existence of substances in body fluids, wherein the device provides a vehicle for both delivery of substances into the body and for analysing of body fluids." *Pub. No. US 2002/0026143 A1*, ¶ 2.<sup>5</sup>

Applicants' invention is meant to be permanently or semi-permanently surgically implanted in the skin. *Pub. No. US 2002/0026143 A1*, ¶ 12. Applicants' invention allows the analysis of body fluids (e.g., the testing of insulin levels) in situ without frequent, invasive techniques, which are unpleasant for the patient. *Pub. No. US 2002/0026143 A1*, ¶¶ 3-4.

Donaldson discloses an earplug that allows a topical anesthetic or sterilizing fluid to be "introduced into the ear canal and held securely therein for a period of time so that topical anesthetization or sterilization is accomplished." *Donaldson*, col. 6, ll. 61-67. Donaldson relies on the conforming nature of its foam body to hold it in place within the ear canal or, alternatively, an "optional adhesive" carried by the flange members 24, 26 for adhering the flange members 24, 26 to the ear surface. *Donaldson*, col. 4, ll. 31-34; col. 5, ll. 13-19. "Topical anesthesia ... typically necessitates an undisturbed contact time with the eardrum of 15-60 minutes. This duration is reduced using an iontophoretic process ... [which] requires only about 15 minutes." *Donaldson*, col. 1, ll. 38-46. Thus, Donaldson is clearly not permanently or semi-permanently surgically implanted in the skin.

Applicants' invention and Donaldson are both directed to specialized, narrow fields. Applicants' invention is directed to a device that is permanently or semi-permanently surgically implanted in the skin and facilitates accessing the interior of the body to deliver substances into the body and to detect concentrations of substances in body fluids. On the other hand, Donaldson is directed to a means of keeping a topical anesthetic or sterilizing fluid in an ear canal for time period of 15-60 minutes. Thus, Applicants respectfully submit that Donaldson is not from the same field as Applicants' endeavor.

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<sup>5</sup> Applicants' application as published February 28, 2002.

2. *Donaldson is not reasonably pertinent to the particular problem with which the Applicants are involved.*

A reference is reasonably pertinent if it is one that, because of the matter with which it deals, logically would have commended itself to an inventor's attention in considering his problem. *In re Clay*, 966 F.2d at 659. As a result, the purposes of both the invention and the cited reference are of importance. *Id.* If the cited reference is directed to a different purpose, the inventor would accordingly have less motivation or occasion to consider it. *Id.*

In *Clay*, the Federal Circuit said that the cited reference was faced with the problem of recovering crude petroleum from subterranean formations of sedimentary rock having voids. The court found this was not reasonably pertinent to the particular problem with which *Clay* was concerned (i.e., obtaining refined petroleum products from the dead volumes of storage tanks). *Id.* at 659-60.

With respect to the rejection of Applicants' claimed invention, *Donaldson* was faced with the problem of "seal[ing] the ear canal so that a topical anesthetic or a sterilizing fluid can be administered to the ear canal and eardrum" for "15-60 minutes." *Donaldson*, col. 1, ll. 40 & 57-59. On the other hand, Applicants were faced with the problem of providing a permanent or semi-permanent means of supplying substances to, and detecting substances in, body fluids without subjecting the patient to frequent, unpleasant invasive procedures (i.e., piercings). Thus, like the cited reference in *Clay*, *Donaldson* is not reasonably pertinent to the problem faced by Applicants. Also, as explained above, *Donaldson* is not from the same field as Applicants' endeavor. Consequently, Applicants respectfully submit that the necessary suggestion or motivation for the Cuschieri/Park/*Donaldson* combination is lacking because, *Donaldson* is nonanalogous to Applicants' claimed invention. For at least these reasons, Applicants respectfully request the reconsideration and withdrawal of the obviousness rejections based on the Cuschieri/Park/*Donaldson* combination.



**b. The Cuschieri/Park/Donaldson combination fails to teach or suggest each and every limitation of Applicants' independent claims 27, 40, 54 and their respective dependent claims.**

Applicants' independent claim 27 recites, "a feed element" and "an aspiration element."  
Applicants' independent claim 40 recites, "analyzing the subject fluids via a first tube."  
Applicants' independent claim 54 recites, "delivering a substance to the site via a feed element" and "analyzing the subject fluids via an aspiration element."

Cuschieri is a "medical device for forming an external extension of the pneumoperitoneum. *Cuschieri, abstract*. Cuschieri does not teach or suggest a tube or analysis, much less an aspiration element or analyzing subject fluids.

Park is an oroesophageal introducer for introducing an echotransducer into the stomach to more readily view the heart as shown in FIG. 4 of Park. *Park, abstract*. Park does not teach or suggest an aspiration element or analyzing subject fluids.

Donaldson is an earplug "for administering topical anesthetic and sterilizing fluids to the eardrum and ear canal." *Donaldson, col. 1, ll. 8-9*. Donaldson has electrodes 84, 86 for performing iontophoretic anesthesia. *see, Donaldson, FIG. 4*. These electrodes are not used for analyzing subject fluids. According to Merriam-Webster OnLine, aspiration means, "a drawing of something in, out, up, or through by or as if by suction as... the withdrawal of fluid or tissue from the body."<sup>6</sup> Though Donaldson discloses two tubes (i.e., conduit 40 and vent tube 46), no mention is made of using either tube to aspirate fluids up through the earplug.

Unlike Applicants' independent claims 27, 40 and 54, Cuschieri, Park and Donaldson do not teach or suggest an aspiration element or analyzing subject fluids. Thus, the Cuschieri/Park/Donaldson combination fails to teach or suggest every limitation recited in Applicants' independent claims 27, 40 and 54 and their respective dependent claims. For at least this reason, the FOA has failed to establish a case of prima facie obviousness for independent claims 27, 40 and 54 and their respective dependent claims. Applicants respectfully request that the obviousness rejection of claims 27-39, 40, 42-54, and 56-62 be reconsidered and withdrawn.

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<sup>6</sup> see, Exhibit C enclosed with this response or visit <http://www.m-w.com/cgi-bin/dictionary?book=Dictionary&va=aspiration>

**B. Cuschieri In View Of Park, In View Patsalos.**

As explained in preceding section II.A., contrary to the assertion made by the FOA, Park does not teach or suggest the conventionality of introducing medical devices through implanted catheters. Therefore, the FOA has failed to establish a case of prima facie obviousness for the Cuschieri/Park/Patsalos combination. Furthermore, the Cuschieri/Park/Patsalos combination is also deficient because Patsalos teaches away from its combination with Cuschieri and there is no reasonable expectation the combination would work.

**a. Patsalos teaches away from its combination with Cuschieri and there is no reasonable expectation the combination would work.**

Patsalos is directed to a dialysis probe for “use[] within a vein or artery.” *Patsalos*, col. 1, ll. 35-37. In other words, the Patsalos probe is placed in contact with circulating blood in order to operate.

Cuschieri is directed to a “medical device for forming an external extension of the pneumoperitoneum (i.e., the “[p]resence of air or gas in the peritoneal cavity ... produced artificially in the abdomen to achieve exposure during laporoscopic surgery.”<sup>7</sup>). Establishing pneumoperitoneum creates a volume between the abdominal wall and the underlying viscera. The volume is filled with inert gas (e.g., CO<sub>2</sub>) and blood does not circulate within the volume. Thus, because the Patsalos probe requires contact with circulating blood, Patsalos teaches against its combination with Cuschieri and, as a result, the necessary motivation or suggestion for combining Cuschieri and Patsalos is lacking. Furthermore, Patsalos would not be expected to work if inserted into a pneumoperitoneum space. Therefore, there is no reasonable expectation that the Cuschieri/Patsalos combination would succeed.

For at least this reason, the FOA has failed to establish a case of prima facie obviousness for independent claims 27-39, 40, 42-54, and 56-62. Applicants respectfully request that the obviousness rejection of claims 27-39, 40, 42-54, and 56-62 be reconsidered and withdrawn.

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<sup>7</sup> see, Exhibit D enclosed with this response or visit Stedman's Online Medical Dictionary, 27th Edition at <http://216.251.241.163/semweb/InternetSOMD/ASP/1554072.asp>

### **CONCLUSION**

In this response, Applicants make no amendments to the pending claims, but do present arguments supporting the patentability of the pending claims over the combinations of cited art. With respect to the 35 U.S.C. § 103(a) rejections based on Bestetti, Baudino, or Schafer in view of Park or Hildwein, Applicants respectfully submit that said rejections should be reconsidered and withdrawn because: (1) Schafer teaches against its combination with Park or Hildwein; (2) Park is not implanted and, as a result, does not teach or suggest the conventionality of inserting an instrument through an implanted catheter, much less an implanted port body or port member; (3) neither Hildwein nor Park teach or suggest inserting an instrument through a self-sealing membrane and a catheter extending therefrom, as they would need to do in order to teach or suggest the necessary modification of Schafer, Baudino, or Bestetti; and (4) the combinations of Bestetti, Baudino, or Schafer in view of Park or Hildwein fail to teach or suggest each and every limitation of claims 13, 15-17, 23 and 24.

With respect to the 35 U.S.C. § 103(a) rejections based on Cuschieri in view of Parks, in further view of Donaldson, Applicants respectfully submit that said rejections should be reconsidered and withdrawn because: (1) Park does not teach or suggest the conventionality of introducing medical devices through implanted catheters; (2) Donaldson is nonanalogous art; and (3) the Cuschieri/Park/Donaldson combination fails to teach or suggest each and every limitation recited in claims 27-39, 40, 42-54 and 56-62.

With respect to the 35 U.S.C. § 103(a) rejections based on Cuschieri in view of Parks, in further view of Patsalos, Applicants respectfully submit that said rejections should be reconsidered and withdrawn because: (1) Park does not teach or suggest the conventionality of introducing medical devices through implanted catheters; and (2) Patsalos teaches away from its combination with Cuschieri and there is no reasonable expectation the combination would work.

Applicant submits herewith a Notice of Appeal and authorizes the Commissioner to charge the appropriate fee of \$330.00 to Deposit Account No. 04-1420. Applicant also submits herewith a Petition for Extension of Time and authorizes the Commissioner to charge the appropriate fee of \$110.00 to Deposit Account No. 04-1420. The Commissioner is hereby authorized to charge any deficiencies and credit any overpayments to Deposit Account No. 04-1420.

This application is allowable form. Reconsideration and allowance is respectfully requested.

Respectfully submitted,

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July 23, 2004

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Exhibit "A"



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**Implant:** 1. To embed; to set in firmly. In embryology, the fertilized egg implants in the uterine lining 6 or 7 days after conception (fertilization). In medicine today, many things may be implanted.

2. That which is embedded. For example: lens implants, breast implants, cochlear implants, defibrillator implants, pacemaker implants, etc.

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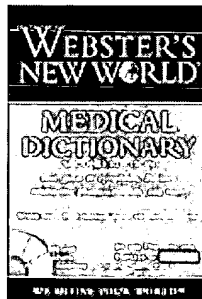
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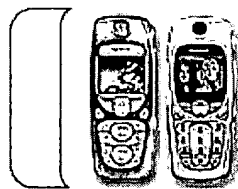
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v. em·bed·ded, em·bed·ding, em·beds  
v. tr.

1. To fix firmly in a surrounding mass: *embed a post in concrete; fossils embedded in shale.*
2. To enclose snugly or firmly.
3. To cause to be an integral part of a surrounding whole: "a minor accuracy embedded in a larger untruth" (Ian Jack).
4. Biology. To enclose (a specimen) in a supporting material before sectioning for microscopic examination.

v. intr.

To become embedded: *The harpoon struck but did not embed.*

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## embedded

Embed \Em\*bed", v. t. [imp. & p. p. Embedded; p. pr. & vb. n. Embedding.] [Pref. em- + bed. Cf. Imbed.] To lay as in a bed; to lay in surrounding matter; to bed; as, to embed a thing in clay, mortar, or sand.

Source: *Webster's Revised Unabridged Dictionary*, © 1996, 1998 MICRA, Inc.

## embedded

adj 1: enclosed firmly in a surrounding mass; "found pebbles embedded in the silt"; "stone containing many embedded fossils"; "peach and plum seeds embedded in a sweet edible pulp" 2: inserted as an integral part of a surrounding whole; "confused by the embedded Latin quotations"; "an embedded subordinate clause"

Source: *WordNet ® 1.6*, © 1997 Princeton University

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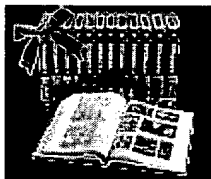
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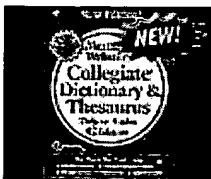
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Pronunciation: "as-p&amp;- 'rA-sh&amp;n

Function: *noun*

Date: 14th century

**1 a** : audible breath that accompanies or comprises a speech sound  
**b** : the pronunciation or addition of an aspiration; *also* : the symbol of an aspiration

**2** : a drawing of something in, out, up, or through by or as if by suction: as **a** : the act of breathing and especially of breathing in  
**b** : the withdrawal of fluid or tissue from the body **c** : the taking of foreign matter into the lungs with the respiratory current

**3 a** : a strong desire to achieve something high or great **b** : an object of such desire

synonym see **AMBITION**- **as·pi·ra·tion·al** /- 'rA-sh (&-) n&l/ *adjective*

aspirati

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Exhibit "D"

**pneumoperitoneum** (noo' mō-per-i-tō-nē' ūm)

Presence of air or gas in the peritoneal cavity as a result of disease, or produced artificially in the abdomen to achieve exposure during laparoscopic surgery.

[G. *pneuma*, air, + peritoneum]

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